

TRICARE Comprehensive Autism Care Demonstration Q&A

Q1. When does the Autism Care Demo begin?

A: The Department will begin implementing the new Autism Care Demonstration on July 25, 2014, with the goal of seamlessly transitioning all ABA for all covered beneficiaries with ASD by December 31, 2014.

Q2. When does the Autism Care Demo end?

A: The Autism Care Demo ends December 31, 2018.

Q3. How does the Autism Care Demo improve ABA coverage for TRICARE beneficiaries with ASD?

A: The Autism Care Demo simplifies existing TRICARE ABA policies into a single, uniform policy for all beneficiary categories. It has new testing requirements that give more flexibility to parents and providers. It also features no annual or lifetime cap on the amount of ABA TRICARE covers.

Q4. Is there an annual or lifetime cap on the amount of coverage a beneficiary can receive under the Autism Care Demo?

A: No.

Q5. Are there any age or duration limits for ABA coverage?

A: TRICARE beneficiaries who request participation in the Autism Care Demo shall be at least 18 months of age. There is no upper age limit. There are no duration limits for clinically necessary provision of ABA. The regional contractor authorizes care for one year at a time after review of the referral and treatment plan documentation.

Q6. Are there any circumstances where TRICARE will end coverage for ABA therapy against the wishes of the parent?

A: Generally speaking, no. Parents need to work with their BCBA and PCM to follow the authorization guidelines (as would be the case with any other ongoing specialty care). The provider may recommend ending the ABA services if they feel it is not effective and decline to provide another referral.

Q7. What is the purpose of the requirement for the two-year comprehensive review for clinical necessity?

A: The comprehensive review for clinical necessity is a clinical quality control measure intended to ensure that continued ABA is appropriate for the beneficiary and is actually helping the beneficiary. The reviews can also help determine best practices to deliver ABA under TRICARE. The reviews are not intended to deny ABA coverage to ASD beneficiaries. The provider may recommend ending the ABA treatment if they feel it is not effective and decline to provide a continuing referral.

Q8. What other services are available to TRICARE beneficiaries with ASD?

A: In addition to covering ABA for all TRICARE beneficiaries with ASD, TRICARE covers all medically or psychologically necessary services such as physician office visits, immunizations, psychological testing, prescription drugs, and interventions such as speech therapy, physical therapy, and occupational therapy.

Q9. What is autism?

A. Autism Spectrum Disorder (ASD) affects essential human behaviors such as social interaction, the ability to communicate ideas and feelings, imagination, and the establishment of relationships with others.

Q10. What is ABA?

A: Applied Behavior Analysis (ABA) is the design, implementation, and evaluation of environmental modifications to produce socially significant modification in human behavior. ABA generally works best when family members participate, so caregivers can implement the ABA treatment plan at home.

Q11. Why does the MHS not consider ABA to be “medical” care?

A: The MHS recognizes that ABA has the potential to reduce or eliminate specific problem behaviors and teach new skills to individuals with ASD. ABA is not proven medical care to treat or cure the underlying causes of ASD. The MHS hopes this comprehensive program will help us gain a better understanding of the effectiveness of ABA and the most appropriate procedures and protocols for providing it.

Q12. How much will ABA cost under the Autism Care Demo?

A: Established TRICARE deductibles or enrollment fees, co-pays or cost shares, and annual catastrophic cap protections apply for ABA provided by a BCBA with a master's degree or above. The customary annual catastrophic cap protections will likewise apply based on sponsor's status (\$1,000 for ADFMs and TRS participants; \$3,000 for retiree dependents, TRS participants).

The applicable copays/cost-shares are:

- Active duty family members with Prime – \$0
- Active duty family members with Standard/Extra - 15% cost share in network, 20% out of network
- Retired family members with Prime – \$12 copay per visit
- Retired family members and TRR with Standard/Extra – 20% cost share in network, 25% out of network
- TRS – 15% cost share in network, 20% out of network
- The above costs all count towards the catastrophic cap (\$1,000 for ADFM and TRS, \$3,000 for retirees and TRR).
- More information about TRICARE costs is at www.tricare.mil/HealthPlanCosts.

Under the Autism Care Demo, there is also a 10% cost share for supervised ABA provided by a BCaBA or Behavior Technician. This does not count toward the catastrophic cap. The monthly ECHO registration fees paid by ADFMs satisfy the Autism Care Demo cost-sharing requirements for supervised ABA provided by a BCaBA or Behavior Technician for ADFMs.

The Autism Care Demo will allow further evaluation of the ABA tiered delivery model for the purpose of assessing the feasibility and advisability of establishing a beneficiary cost share for the treatment of ASD.

Q13. Do the 10% cost shares apply to active duty families who get ABA from a BCaBA or Behavior Technician?

A: No. Active duty sponsors must still register for ECHO to participate in the Autism Care Demo. Their monthly ECHO registration fees will satisfy the Autism Care Demo 10% cost-sharing requirements for supervised ABA provided by a BCaBA or Behavior Technician for ADFMs.

Q14. *How long has TRICARE covered ABA?*

A: TRICARE has covered ABA for ADFMs since 2005 as a benefit of the Extended Care Health Option (ECHO), and prior to 2005 within the Program for Persons with Disabilities (PFPWD). To increase access to ABA services, the Department implemented within ECHO the Enhanced Access to Autism Services Demonstration in March 2008. The demonstration expanded the opportunity for access to ABA through a variety of provider types, including BCaBAs and supervised tutors (now called Behavior Technicians). Beginning in August 2012, TRICARE expanded ABA coverage for non-ADFM with ASD under the Basic Program, with additional coverage provided under the one-year ABA Pilot from Jul 2013 to July 2014.

Q15. *What type of provider can make a qualifying ASD diagnosis?*

A: Providers authorized to independently diagnose ASD and request a referral for TRICARE coverage of ABA include only:

- TRICARE authorized physician PCMs (P-PCMs) for the purposes of the diagnosis of ASD: TRICARE authorized family practice, internal medicine, and pediatric physicians whether they work in the purchased care or direct care system.
- Authorized specialty ASD diagnosing providers: TRICARE authorized physicians board-certified or board-eligible in behavioral developmental pediatrics, neurodevelopmental pediatrics, pediatric neurology, adult or child psychiatry; or doctoral-level licensed clinical psychologists.

Examples of providers NOT authorized to independently diagnose ASD:

- Primary care providers who are specialists in areas other than family practice, internal medicine or pediatric physicians
- Physician Assistants (PAs) and Certified Registered Nurse Practitioners (CRNPs) who serve as PCMs

Q16. *What type of providers may give a qualifying ASD diagnosis that does not require an Autism Diagnostic Observation Schedule, Second Edition (ADOS-2) test to confirm the diagnosis?*

A: If an ASD diagnosis is made by a TRICARE authorized specialized ASD diagnosing provider, then no ASD-specific diagnostic confirmation testing is required. If the diagnosis is made by a TRICARE authorized family practice, internal medicine or pediatric physician, and not a specialized ASD diagnosing provider, then either the ADOS-2 or a diagnostic evaluation to confirm ASD by an authorized specialty ASD diagnosing provider (see Q15) is required within one year of the initial ABA Authorization Letter to confirm the ASD diagnosis.

Q17. Which assessment tools can BCBA's use for progress reports?

A: Progress reports are required every 6 months. BCBA's have the option of reporting progress using several objective assessment tools, including:

- The Assessment of Basic Learning and Language Skills – Revised (ABLLS-R)
- The Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP)
- The Vineland Adaptive Behavioral Scale (2nd Edition)

BCBA's may also use other measures to track progress based on their professional judgment. These measures can be graphic representations of progress to meet individual treatment plan objectives.

Q18. What is the process for reauthorizing ABA care?

A: At least two months prior to the expiration of the current ABA Authorization Letter, the BCBA will coordinate a new referral request with the current physician primary care manager or specialized ASD diagnosing provider who made the initial referral for ABA. Upon receipt of a request for continued ABA – which must include the BCBA progress reports and updated ABA Treatment Plan (along with an ADOS-2 or specialty ASD diagnosing provider diagnostic evaluation, if required to confirm ASD diagnosis) -- the regional contractor will promptly issue an authorization letter for another year of ABA.

Q19. What happens to beneficiaries receiving ABA when their sponsor transitions from Prime to Standard (or vice-versa)?

A: The coverage and testing requirements are the same under the Autism Care Demo no matter what TRICARE plan a sponsor uses. However, as with most TRICARE covered services, costs vary according to plan.

Q20. What happens to beneficiaries receiving ABA when their sponsor transitions from active duty to retired?

A: Their ABA coverage under the Autism Care Demo will be consistent, however once they leave active duty they will no longer be eligible for ECHO, so different co-pay and cost share rules will apply.

Q21. Can beneficiaries living outside the U.S. get coverage under the Autism Care Demo?

A: Generally, the Autism Care Demo is available in the 50 United States. Beneficiaries living outside the United States may have ABA services covered if it is delivered by a masters level BCBA or above, certified by the Behavior Analyst Certification Board. The services of supervised BCaBAs or Behavior Technicians are not covered under the Autism Care Demo outside the 50 United States.

Q22. Is access to the ADOS-2 test difficult for beneficiaries?

A: Many BCBAs are already trained in this test (about 2/3 in the West region)*, and training is a one day process for providers. This is one of the requirements developed in close concert with ASD experts, ABA providers, and military family advocates. Beneficiaries have one year from their initial diagnosis to get ADOS-2 testing for their child. If they experience difficulty accessing an ADOS-2 within one year, their regional contractor can help them schedule an appointment with a specialty ASD diagnosing provider, whose ASD diagnosis removes the need for the ADOS-2 testing. (See Q.16 for more details.).

TRICARE will also accept ADOS-2 testing done within one year of referral to the Autism Care Demonstration by the school system or the Educational and Developmental Intervention Services (EDIS). Additionally, beneficiaries have the option of seeing an authorized ASD specialty diagnosing provider for a diagnostic evaluation to confirm diagnosis of ASD within one year of initial diagnosis by a physician PCM instead of the ADOS-2.

* United Health is the only regional contractor that reports this metric.

Q23. How will the phase out of the current ABA policies work?

A: All beneficiaries currently receiving ABA benefits under the three current ABA policies will seamlessly transition to coverage under the Autism Care Demo. There is no additional testing or authorization requirements for those beneficiaries to continue their coverage during or after the transition.

The ABA Pilot is set to expire July 2014, but the benefits will be extended until Dec. 31, 2014. In addition, ABA services under the Basic Program and the ECHO Autism Demonstration will continue to December 31, 2014. Although the ACD begins on July 25, 2014, beneficiaries will not start being covered in the program until Dec. 31, 2014. This means that beneficiaries who begin ABA between those dates will enroll in one of the existing programs, and then transition on Dec. 31.

Q24. The Federal Register contains the phrase “Discharge criteria will be established to guide regional medical directors in determining if/when ABA is no longer appropriate for a particular beneficiary.” Does this mean that TRICARE will decide if ABA therapy is no longer a viable treatment option against the will of the parents?

A: No, the parent works with their BCBA and physician PCM to follow the authorization guidelines (as would be the case with any other ongoing specialty care). The provider may recommend ending ABA services if they feel it is not effective and decline to provide a continuing referral.

Q25. Why doesn't TRICARE cover ABA for other developmental disabilities such as Down syndrome and intellectual disabilities other than ASD?

A: DoD conducted an extensive review of the clinical research and determined that, to-date there is insufficient clinical evidence to authorize TRICARE coverage of ABA for any developmental disabilities other than ASD. DoD continues to monitor developments in the appropriate uses of ABA for other conditions.

Q26. Why aren't Bachelors-level BCaBAs allowed to continue providing ABA independently as they were under the ECHO Autism Demonstration for ADFMs?

A: All Bachelors-level BCaBAs will now work under the supervision of a Masters-level BCBA. This is a change from the ECHO program but is consistent with recent Behavior Analyst Certification Board (BACB) guidelines and is a BCaBA board certification requirement. Those guidelines were issued several years after TRICARE began covering BCaBA services under the ECHO Autism Demonstration. TRICARE is working with the regional contractors to ensure that all beneficiaries with a proper ASD diagnosis receive ABA from a BCBA, which may include the services of BCaBAs and Behavior Technicians supervised by that BCBA.

Q27. Will those beneficiaries currently in either the ECHO Autism Demonstration or the ABA Pilot be required to get the ADOS-2 testing within the two year time period to determine if ABA is actually helping?

A: No, they will be grandfathered in and not require the ADOS-2 test. However, all beneficiaries covered by the Autism Care Demo must undergo progress assessment every six-months performed by their BCBA, reauthorization every year and review for clinical necessity every two years.

Q28. Since there isn't an upper age limit, will the Autism Care Demonstration continue to cover beneficiaries when they transition to TRICARE Young Adult (TYA)?

A: Yes. When beneficiaries age out of normal TRICARE eligibility, they are eligible for TYA, which provides the same coverage as other TRICARE programs. Most children stop using ABA by the time they age-out of normal TRICARE benefits (age 21, or 23 for those enrolled full-time in college).

Q29. What will be the costs for TYA beneficiaries?

A: TYA beneficiaries must pay premiums for their coverage, which change annually. TYA features the same per service cost-share, deductible, and catastrophic cap provisions of the TRICARE plan purchased (TYA Standard or TYA Prime) based on the status of the uniformed service sponsor and the geographical location of the young adult dependent.

Q30. If ADFM beneficiaries currently receiving ABA under Prime received their ASD diagnosis from non-TRICARE authorized specialized ASD diagnosing providers, or from an MTF PCM, do they need to receive ADOS-2 testing?

A: No. All beneficiaries currently receiving ABA under any of the three programs (ABA under Basic, the ECHO Autism Demonstration for ADFMs and the ABA Pilot for NADFM) are being grandfathered into the new ACD. The ADOS-2 or specialty ASD diagnosing provider evaluation for confirmation of ASD will only be required for new cases where the initial diagnosis is made by a physician PCM.

Q31: Do families qualify for ABA services while traveling within the U.S.? How does that work obtaining services? How does it work with ABA services? If we take vacation would we have to wait for a referral and authorization to receive those services?

A: Generally, no. ABA is a specialized behavioral intervention designed by a master's level or above BCBA or other qualifying provider and always requires referral and prior authorization from your regional contractor. It is not appropriate to obtain ABA while traveling. Parental training in ABA interventions is an integral part of ABA benefits under TRICARE. Parents are highly encouraged to incorporate what is learned during parent training into their daily routines, so that these techniques are at their disposal, especially during time of change in routine, such as a vacation or other travel.

Q32: Will beneficiaries be able to file claims for reimbursement after the ACD starts for any differences in cost they may incur between July 25 and Dec. 31?

A: Yes, beneficiaries should save their receipts for ABA services provided from July 25, 2014 to Dec. 31, 2014. They may pay costs during that time that would exceed their costs under the ACD, and be eligible for reimbursement.